



SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU
MAIN CAMPUS
Name of Project

BAC Resolution Recommending Approval
Resolution No. 073, s. 2025

WHEREAS, the **Mindoro State University (MinSU)**, through Bids and Awards Committee (BAC) has advertised in the PhilGEPS and MinSU Website the **Request for Quotation (RFQ) No. 2025-067** for the project **"Supply and Delivery of Drugs and Medicines for the University Clinic of MinSU Main Campus"** with an Approved Budget for the Contract (ABC) amounting to **One Hundred Thousand Pesos (Php100,000.00)**;

WHEREAS, in response to the advertisement of the project, four (4) suppliers/bidders were found in the document request list, however two (2) suppliers/bidders in the name **CPA PHARMACY** and **THIRD DEGREE PHARMA AND MEDICAL SUPPLIES TRADING** submitted price quotation before the deadline;

WHEREAS, the detailed evaluation of price quotation resulted in the following:

Approved Budget for the Contract (ABC)	Name of Bidder	Price Quotation
Php100,000.00	CPA Pharmacy	Php70,425.00
	Third Degree Pharma And Medical Supplies Trading	Php87,375.00

WHEREAS, the BAC examined and verified the price quotation submitted by the abovementioned suppliers and were found to be complying and responsive;

NOW, THEREFORE, BE IT RESOLVED that the BAC hereby recommends to the Head of Procuring Entity the approval of awarding the contract involving the project, **"Supply and Delivery of Drugs and Medicines for the University Clinic of MinSU Main Campus"** as follows:

- to CPA Pharmacy for being the supplier/bidder with the Lowest Calculated Responsive Bid (LCRB);

RESOLVED, this 22nd day of April, 2025 at MinSU-Main Campus, Alcate, Victoria, Oriental Mindoro.


CIEDELLE P. SALAZAR, J.D., Ph.D.
BAC Chairperson


Engr. MARK LESTER A. MAGPANTAY
BAC Vice Chairperson


ATTY. SHERLYN A. LAYESA
BAC Member


FRANIE M. AFABLE, DBMHM
BAC Member


MELGAR G. FADRIQUELAN
BAC Member

Approved/Disapproved


ENYA MARIE D. APOSTOL, Ph.D.
SUC President III

Date: _____



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 11945836
Procuring Entity MINDORO STATE UNIVERSITY
Title SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS
Area of Delivery Oriental Mindoro

Solicitation Number:	RFQ No. 2025-067	Status	Closed
Trade Agreement:	Implementing Rules and Regulations	Associated Components	1
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	4
Category:	Drugs and Medicines	Date Published	05/04/2025
Approved Budget for the Contract:	PHP 100,000.00	Last Updated / Time	05/04/2025 00:00 AM
Delivery Period:	30 Day/s	Closing Date / Time	08/04/2025 17:00 PM
Client Agency:			
Contact Person:	Christian B. Apostol BAC Secretariat Head Alcate Victoria Oriental Mindoro Philippines 5205 63-43-2862368 cbapostol21@gmail.com		

Description

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the address stated in the last page.

CIEDELLE PIOL-SALAZAR, J.D., Ph.D.

BAC Chairperson

Note: 1. All entries must be typewritten.

2. Delivery Period within ____ calendar days.

3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.

4. Price validity shall be a period of 30 calendar days.

5. G-EPS Registration Certificate shall be attached upon submission of the Quotation.

6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).

7. Mode of delivery: [] Pick-up (Schedule) [] Door to Door Delivery

Item

No. Unit ITEM AND DESCRIPTION QTY. UNIT

PRICE TOTAL AMOUNT

1 bottles Aceite De Manzanilla 60ml 24

2 tablets Ascorbic Acid 500 mg 1050

3 boxes Band Aid 25

4 boxes Butamirate Citrate 50mg by 100's 2

[illegible]

Created by	Annabelle Quinto Madrigal
Date Created	04/04/2025

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Mindoro State University
Victoria, Oriental Mindoro 5100 Philippines

Email: office@msu.edu.ph
Website: www.msu.edu.ph
Mobile: +63 977 846 72 28



ABSTRACT OF QUOTATIONS/S

I. Particulars											
Project Name: SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS											
Project Location: <u>MINSU Main Campus</u>											
Implementing Office: <u>Small Value Procurement</u>											
Method of Procurement: <u>ABC</u>											
Approved Budget for the Contract (ABC): <u>₱ 100,000.00</u>											
Deadline of Submission of Quotation: _____											
Lot No.: _____											
II. Abstract of Quotations / for SVP											
Evaluation of Document/s Required to be Submitted within the deadline specified in the RFQ											
TWG Report											
No	Participating Bidder/s	Date and Time of Receipt	Eligibility Requirements		Technical Requirements		Financial Requirements		Bid Amount	Rank	Remarks
			Pass	Fail	Pass	Fail	Pass	Fail			
1	CPA Pharmacy	/	/		/		/		₱ 70,425.00	1	LCRG
2	THIRD DEGREE PHARMA AND MEDICAL SUPPLIES TRADING	/	/		/		/		₱ 87,375.00	2	
III. Recommendation /Resolution											
<input type="checkbox"/> Recommend to Award Contract											
Date: _____											
Lowest / Single Calculated and Responsive Quotation:			CPA Pharmacy			Contract Price Award (in words & figures):					
						Seventy thousand, four hundred twenty-five. (₱ 70,425.00)					
<input type="checkbox"/> Declaration of Failure under Section 35 of Revised IRR of RA 9184											
<input type="checkbox"/> All prospective bidders are declared ineligible [Sec. 35.1(b)]											
<input type="checkbox"/> All bids failed to comply with all the bid requirements or fail post-qualification [Sec. 35.1(c)]											
Date: _____											
LINA B. JAVIER TWG Member			MAY C. BERON TWG Member			FELIX A. MINESTERIO TWG Member			MERVIN L. ICALLA TWG Member		
Engr. MARK KEYLORD S. ONAL BAC-TWG Head											

Proceed only if recommended for award of contract



Mindoro State University
Victoria, Oriental Mindoro 5205 Philippines

Email: universitypresident@mins.edu.ph
Website: www.minsu.edu.ph
Mobile: +63 977 846 72 28



REQUEST FOR QUOTATION

SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS

PR No.: PR25-0090

RFQ No. 2025-067

ABC Amount: Php100,000.00

Company Name : CPA Pharmacy
Address : Poblacion 1, Victoria, Oriental Mindoro

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than _____ in the address stated in the last page.

CIEDELLE PIOL-SALAZAR, J.D., Ph.D.

BAC Chairperson

Note:

1. All entries must be typewritten.
2. Delivery Period within 15 calendar days.
3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
4. Price validity shall be a period of 30 calendar days.
5. G-EPIS Registration Certificate shall be attached upon submission of the Quotation.
6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).
7. Mode of delivery: [] Pick-up (Schedule) [X] Door to Door Delivery

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
1	bottles	Aceite De Manzanilla 60ml	24	50.00	1,200.00
2	tablets	Ascorbic Acid 500 mg	1050	1.50	1,575.00
3	boxes	Band Aid	25	100.00	2,500.00
4	boxes	Butamirate Citrate 50mg by 100's	2	1,100.00	2,200.00
5	pieces	Camphor, Menthol Eucalyptus Oil 10g	36	85.00	3,060.00
6	tablets	Cefuroxime 500mg	200	24.00	4,800.00
7	tablets	Celecoxib 400mg	200	6.00	1,200.00
8	boxes	Clindamycin HCl 300mg	1	700.00	700.00
9	tubes	Clobetasole Ointment 5g	10	150.00	1,500.00
10	boxes	Cloxacillin 500mg by 100's	2	650.00	1,300.00
11	tablets	Co Amoxiclav 625mg	300	24.00	7,200.00
12	boxes	Dequalinium Chloride	5	1,100.00	5,500.00
13	sachets	Dichlorobenzyl Alcohol Amylmetacresol Ascorbic Acid by 2's	200	27.00	5,400.00
14	boxes	Domperidone 10mg by 100's	2	600.00	1,200.00
15	bottles	Efficascent Oil 60ml	24	65.00	1,560.00
16	boxes	Ferrous SO4 60mg by 100's (individually packed)	10	150.00	1,500.00
17	tablets	Hyoscine N-Butyl Bromide 10mg	300	7.00	2,100.00
18	bottles	Hydrogen Peroxide 120ml	36	35.00	1,260.00
19	bottles	Hexetidine 250ml	6	500.00	3,000.00
20	boxes	Loperamide 2mg by 100's	4	150.00	600.00
21	boxes	Loratadine 10mg by 100's	10	700.00	7,000.00
22	boxes	Mefenamic Acid 500mg tablets by 100's	3	250.00	750.00
23	tubes	Mupirocin Ointment 5g	6	150.00	900.00
24	bottles	Methyl Salicylate Camphor + Menthol 30ml	40	50.00	2,000.00
25	boxes	Omeprazole Inhibita 40mg by 100's	2	750.00	1,500.00
26	bottles	Povidone Iodine 7.5ml	48	45.00	2,160.00
27	bottles	Povidone Iodine 15ml	36	85.00	3,060.00
28	tablets	Paracetamol Propyphenazone Caffeine	300	10.00	3,000.00
29	tablets	Prednisone 5mg	200	2.00	400.00
30	boxes	Vitamin B1 B2 B12 by 100's	2	150.00	300.00

MSU-BAC-FR-05.01





REQUEST FOR QUOTATION

SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS

PR No.: PR25-0090

RFQ No. 2025-067

ABC Amount: Php100,000.00

Company Name : **THIRD DEGREE PHARMA AND MEDICAL SUPPLIES TRADING**

Address : **Sitio Pantalan, Brgy. Poblacion, Mansalay, Oriental Mindoro**

Please quote your lowest price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than **APRIL 8, 2025** in the address stated in the last page.

CIEDELLE PIOL-SALAZAR, J.D., Ph.D.

BAC Chairperson

Note:

1. All entries must be typewritten.
2. Delivery Period within 30 calendar days.
3. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for Equipment, from date of acceptance by the procuring entity.
4. Price validity shall be a period of 30 calendar days.
5. G-EPIS Registration Certificate shall be attached upon submission of the Quotation.
6. Bidders shall submit Original Brochures showing certification of the product being offered (optional).
7. Mode of delivery: [] Pick-up (Schedule) [X] Door to Door Delivery
- 8.

Item No.	Unit	ITEM AND DESCRIPTION	QTY.	UNIT PRICE	TOTAL AMOUNT
1	bottles	Aceite De Manzanilla 60ml	24	60.00	1,440.00
2	tablets	Ascorbic Acid 500 mg	1050	3.00	3,150.00
3	boxes	Band Aid	25	105.00	2,625.00
4	boxes	Butamirate Citrate 50mg by 100's	2	1,800.00	3,600.00
5	pieces	Camphor, Menthol Eucalyptus Oil 10g	36	97.50	3,510.00
6	tablets	Cefuroxime 500mg	200	45.00	9,000.00
7	tablets	Celecoxib 400mg	200	45.00	9,000.00
8	boxes	Clindamycin HCl 300mg	1	495.00	495.00
9	tubes	Clobetasole Ointment 5g	10	567.00	5,670.00
10	boxes	Cloxacillin 500mg by 100's	2	825.00	1,650.00
11	boxes	Co Amoxiclav 625mg	300	6.00	1,800.00
12	boxes	Dequalinium Chloride	5	105.00	525.00
13	sachets	Dichlorobenzyl Alcohol Amylmetacresol Ascorbic Acid by 2's	200	37.50	375.00
14	boxes	Domperidone 10mg by 100's	2	300.00	600.00
15	bottles	Efficascent Oil 60ml	24	165.00	3,960.00
16	boxes	Ferrous SO4 60mg by 100's (individually packed)	10	147.00	1,470.00
17	tablets	Hyoscine N-Butyl Bromide 10mg	300	7.50	2,250.00
18	bottles	Hydrogen Peroxide 120ml	36	45.00	1,620.00
19	bottles	Hexetidine 250ml	6	675.00	4,050.00
20	boxes	Loperamide 2mg by 100's	4	150.00	600.00
21	boxes	Loratadine 10mg by 100's	10	900.00	9,000.00
22	boxes	Mefenamic Acid 500mg tablets by 100's	3	255.00	765.00
23	tubes	Mupirocin Ointment 5g	6	255.00	1,350.00
24	bottles	Methyl Salicylate Camphor + Menthol 30ml	40	67.50	2,700.00
25	boxes	Omeprazole Inhibita 40mg by 100's	2	795.00	1,590.00
26	bottles	Povidone Iodine 7.5ml	48	150.00	7,200.00
27	bottles	Povidone Iodine 15ml	36	60.00	2,160.00
28	tablets	Paracetamol Propyphenazone Caffeine	300	12.00	3,600.00
29	tablets	Prednisone 5mg	200	6.00	1,200.00
30	boxes	Vitamin B1 B2 B12 by 100's	2	210.00	420.00

MSU-BAC-FR-05.01



Fw: Invitation for Request for Quotation (RFQ) Form Submission

From BAC OFFICE <bac.office@minsu.edu.ph>

Date Mon 4/7/2025 10:43 AM

To **Lawig Louella joy** <lawiglouellajoy384@gmail.com> (KUSTWIN)

 17 attachments (15 MB)

RFQ 2025-067 SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS 100,000.00.pdf; RFQ 2025-068 SUPPLY AND DELIVERY OF OTHER SUPPLIES AND MATERIALS FOR THE UNIVERSITY LIBRARY OF MINSU BONGABONG CAMPUS 104,650.00.docx.pdf; RFQ 2025-070 SUPPLY AND DELIVERY OF WORKSTATION AND ICT EQUIPMENT FOR THE VPAFCO FINANCE OFFICE OF MINSU 129,960.00.pdf; RFQ 2025-071 SUPPLY AND DELIVERY OF SEMI-EXPENDABLE ICT EQUIPMENT FOR THE EXTENSION OFFICE OF MINSU BONGABONG CAMPUS 69,980.00.pdf; RFQ 2025-072 SUPPLY AND DELIVERY OF VEHICLE COMPONENTS OF MINSU MAIN CAMPUS 77,050.00.pdf; RFQ 2025-073 SUPPLY AND DELIVERY OF SEMI-EXPENDABLE ICT EQUIPMENT AND SEMI-EXPENDABLE FURNITURE & FIXTURES 255,165.38.pdf; RFQ 2025-052 SUPPLY AND DELIVERY OF OTHER SUPPLIES AND MATERIALS FOR THE AVR OF MINSU CALAPAN CITY CAMPUS 99,999.37.pdf; RFQ 2025-057 BANANA AND MUSHROOM 60,150.00.pdf; RFQ 2025-058 SUPPLY AND DELIVERY OF INPUTS FOR RICE PRODUCTION PROJECT (FOR DRY SEASON) OF MINSU 467,951.64.pdf; RFQ 2025-059 SUPPLY AND DELIVERY OF OFFICE SUPPLIES FOR THE REGISTRAR'S OFFICE AT MINSU BONGABONG CAMPUS 126,434.06.pdf; RFQ 2025-060 SUPPLY AND DELIVERY OF OTHER SUPPLIES AND TEMPERED GLASS SWING DOOR FOR THE UNIVERSITY LIBRARY OF MINSU CALAPAN CITY CAMPUS 149,585.00.pdf; RFQ 2025-061 SUPPLY AND DELIVERY OF WORKSTATION FOR MINSU MAIN CAMPUS 855,500.00.pdf; RFQ 2025-062 SUPPLY AND DELIVERY OF TRAINING MATERIALS FOR THE STC4ID PROJECT OF MINSU 58,000.00.pdf; RFQ 2025-063 SUPPLY AND DELIVERY OF OTHER SUPPLIES AND MATERIALS FOR MINSU CALAPAN CITY CAMPUS 200,000.00.pdf; RFQ 2025-064 SUPPLY AND DELIVERY OF INPUTS FOR THE WATER REFILLING STATION OF MINSU MAIN CAMPUS 80,089.80.pdf; RFQ 2025-065 SUPPLY AND DELIVERY OF SEMI-EXPENDABLE FURNITURE & FIXTURES FOR THE UNIVERSITY REGISTRAR OF MINSU BONGABONG CAMPUS 126,000.00.pdf; RFQ 2025-066 SUPPLY AND DELIVERY OF ICT EQUIPMENT FOR THE RESEARCH AND DEVELOPMENT OFFICE OF MINSU MAIN CAMPUS 61,500.00.pdf;

Dear Sir/Madam,

Greetings!

Please find attached the Request for Quotation (RFQ) forms, which have been posted on the PhilGEPS website of our university.

If you are interested, kindly complete and submit the form. If you are not interested, we kindly request that you respond to this email or submit an RFQ form with "Not Interested" written on it.

The deadline for submission is tomorrow, April 8, 2025, no later than 5:00 PM.

Thank you for your attention to this matter.

-BAC



Mindoro State University

Statement of Confidentiality and Data Privacy

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Republic of the Philippines
Department of Budget and Management
PROCUREMENT SERVICE
CERTIFICATE OF PHILGEPS REGISTRATION
(Platinum Membership)

THIS IS TO CERTIFY THAT

CPA PHARMACY

POBLACION 1 ,
Victoria , Oriental Mindoro , Region IV-B , Philippines

is registered in the **Philippine Government Electronic Procurement System (PhilGEPS)** on 27-Jan-2005 pursuant to Section 8.5.2 of the Revised Implementing Rules and Regulations of Republic Act No. 9184, otherwise known as the Government Procurement Reform Act.

This further certifies that **CPA PHARMACY** has submitted the required eligibility documents in the PhilGEPS Supplier Registry as listed in Annex A, which document is attached hereto and made an integral part hereof.

For the purpose of updating this Certificate, all Class "A" eligibility documents covered by Section 8.5.2 of the Revised Implementing Rules and Regulations of Republic Act No. 9184 supporting the veracity, authenticity and validity of this Certificate shall remain current and updated. The failure by the prospective Bidder to update this Certificate with the current and updated Class "A" eligibility documents shall result in the automatic suspension of its validity until such time that all of the expired Class "A" eligibility documents has been updated.

By submitting this Certificate, the Bidder certifies:

1. the authenticity, genuineness, validity, and completeness of the copy of the original eligibility documents submitted;
2. the veracity of the statements and information contained therein;
3. that the Certificate is not a guaranty that the named registrant will be declared eligible without first being determined to be such for that particular bidding, nor is it an evidence that the Bidder has passed the post-qualification stage; and
4. that any finding of concealment, falsification, or misrepresentation of any of the eligibility documents submitted, or the contents thereof shall be a ground for disqualification from further participation in the bidding process, without prejudice to the imposition of appropriate administrative, civil and criminal penalty in accordance with the laws.

This Certificate is valid until 01-Jun-2025

Issued this 27th day of May 2024.
This is a system generated certificate. No signature is required.



REMINDERS ¹

- *The PhilGEPS office shall not determine the eligibility of merchants. The PhilGEPS office's evaluation of the eligibility requirements shall be for the sole purpose of determining the approval or disapproval of the merchant's application for registration.*
- *A merchant's registration and membership in the GOP-OMR is neither contract-specific nor understood to be tantamount to a finding of eligibility. Neither shall the merchant's successful registration in the GOP-OMR be relied upon to claim eligibility for the purpose of participation in any public bidding.*
- *The determination of the eligibility of merchants, whether registered with the GOP-OMR or not, shall remain with the Bids and Awards Committee (BAC). The BAC's determination of validity of the eligibility requirements shall be conclusive to enable the merchant to participate in the public bidding process.*

List of Eligibility Documents

of

CPA PHARMACY

POBLACION 1 ,

Victoria , Oriental Mindoro , Region IV-B , Philippines

DTI Certificate	DTI Certificate Number : 2209456 Issued By / Signatory : RAMON M. LOPEZ Registration Date : 01-Oct-2020 Expiration Date : 01-Oct-2025
Mayors Permit	Expiration Date : 31-Dec-2024 Permit Number : 888 0345 Place of Issue : VICTORIA ORIENTAL MINDORO Issued By / Signatory : JOSELITO C. MALABANAN Issuance Date : 10-Jan-2024
Tax Clearance	Expiration Date : 01-Mar-2025 TCC Number : RR9A-063-02-29-R0407-2024-E Issued By / Signatory : AMIHAN L. VALDEZ Issuance date : 29-Feb-2024
Audited Financial Statement	Date of Filing : 10-Apr-2024 Current Asset : 2,618,117.50 Total Asset : 3,255,741.50 Current Liabilities : 43,625.14 Total Liabilities : 43,625.14 Name of Auditor : FLOR S. MARASIGAN BIR RDO Code : 063
PCAB License	Expiration Date : - Issued By / Signatory : Issuance Date : - License Number : License First Issue Date : - Principal Classification : Category :



Republic of the Philippines
Province of Oriental Mindoro
MUNICIPALITY OF VICTORIA

KNOW ALL MEN BY THESE PRESENT

Pursuant to the provision of Tax Ordinance Number 06-2012, otherwise known as the revised Revenue Code of Victoria, Oriental Mindoro, after the taxes and Charges, etc., and compliance with the existing requirements permit is hereby granted to herein taxpayer.

Mayor's Permit of Business

Status: Renew	Permit Number: 888-0156	Date of Issuance: 06 Jan 2025 A	Date of Expiration: December 31, 2025
O.R. Number: 4334381	O.R. Date: 1/06/2025	Amount Paid: 32,730.00	Capital Gross Sales: 4,200,000.00
Taxpayer's Name: MATANGUIHAN, YOLANDA			
Business Name: CPA PHARMACY			
Nature of Business: <small>DRUGSTORE, MEDICAL AND DENTAL SUPPLIES AND EQUIPMENT (WHOLESALE/RETAILER) OFFICE EQUIPMENT, MACHINERY AND ELECTRONIC EQUIPMENT</small>			
Address: OLD MARKET, POBLACION I, Victoria, Oriental Mindoro			

PERMIT SHALL BE SUBJECT TO IMMEDIATE CANCELLATION IF THERE IS FAILURE ON PART OF THE GRANTEE TO CONTINUOUSLY COMPLY WITH THE PROVISION OF THE BUILDING CODE OF THE PHILIPPINES AND OTHER PERTINENT LAWS AND REGULATION RELATIVE TO ISSUANCE OF PERMIT AND LICENSE

Approved by:

By the Authority of the Mayor

JOSELITO C. MALABANAN
Municipal Mayor

This Franchise Permit and Official Receipt shall be displayed or posted for public view in a conspicuous place within the place of business of undertaking.

Omnibus Sworn Statement


Republic of the Philippines)
Province of Or. Mindoro) SS
Municipality of Victoria)

AFFIDAVIT

I, YOLANDA D. MATANGUIHAN, of legal age, married, Filipino, and residing at Poblacion 1, Victoria, Oriental Mindoro, after having been duly sworn in accordance with law, do hereby depose and state that:

1. I am the sole proprietor of CPA PHARMACY with office address at Poblacion 1, Victoria, Oriental Mindoro;
2. As the owner and sole proprietor of CPA PHARMACY, I have full power and authority to do, execute and perform any and all acts necessary to represent it in the bidding for SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS;
3. CPA PHARMACY is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;
4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5. CPA PHARMACY is authorizing the Head of the Procuring Entity or its duly authorized representative to verify all the documents submitted;
6. I am not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;
7. CPA PHARMACY complies with existing labor laws and standards; and
8. CPA PHARMACY is aware of and has undertaken the following responsibilities as a Bidder:
 - a. Carefully examine all of the Bidding Documents;
 - b. Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
 - c. Made an estimate of the facilities available and needed for the contract to be bid, and inquire or secure Supplemental/Bid Bulletin(s) issued for the SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS.
9. CPA PHARMACY did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with the unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.

IN WITNESS WHEREOF, I have hereunto set my hand this 8th day of April, 2025 at Victoria Oriental Mindoro, Philippines.


YOLANDA D. MATANGUIHAN
Affiant

ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 8th day of April, 2025 at Victoria, Oriental Mindoro, Philippines. Affiant personally known to me and was identified by me through competent evidence of identity as defined in the 2004 Rules on National Practice (A.M. No. 02-8-13-SC). Affiant exhibited to me her PRC ID, with her photograph and signature appearing thereon, with No. 0029008 and her Community Tax Certificate No. 15791150 issued on January 5, 2025 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 10th day of April, 2025.


Atty. Ariezza Lynne F. Maramot
Notary Public

Until December 31, 2026 NP-25-318

PTR No. 4304361/Victoria, Or. Mindoro/01-28-25

Roll No. 95398/Jan. 24, 2025

IBP No. 518741/Jan. 25, 2025/Or. Mindoro

MCLE Compliance No. Newly Admitted

Doc. No. 40;
Page No. 9;
Book No. 1;
Series of 2025

Omnibus Sworn Statement


Republic of the Philippines)
Province of Or. Mindoro) SS
Municipality of Victoria)

AFFIDAVIT

I, YOLANDA D. MATANGUIHAN, of legal age, married, Filipino, and residing at Poblacion 1, Victoria, Oriental Mindoro, after having been duly sworn in accordance with law, do hereby depose and state that:

1. I am the sole proprietor of CPA PHARMACY with office address at Poblacion 1, Victoria, Oriental Mindoro;
2. As the owner and sole proprietor of CPA PHARMACY, I have full power and authority to do, execute and perform any and all acts necessary to represent it in the bidding for SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS;
3. CPA PHARMACY is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;
4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5. CPA PHARMACY is authorizing the Head of the Procuring Entity or its duly authorized representative to verify all the documents submitted;
6. I am not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;
7. CPA PHARMACY complies with existing labor laws and standards; and
8. CPA PHARMACY is aware of and has undertaken the following responsibilities as a Bidder:
 - a. Carefully examine all of the Bidding Documents;
 - b. Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
 - c. Made an estimate of the facilities available and needed for the contract to be bid, and inquire or secure Supplemental/Bid Bulletin(s) issued for the SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS.
9. CPA PHARMACY did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with the unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.

IN WITNESS WHEREOF, I have hereunto set my hand this 8th day of April, 2025 at Victoria Oriental Mindoro, Philippines.


YOLANDA D. MATANGUIHAN
Affiant

ACKNOWLEDGEMENT

SUBSCRIBE AND SWORN to before me this 8th day of April, 2025 at Victoria, Oriental Mindoro, Philippines. Affiant personally known to me and was identified by me through competent evidence of identity as defined in the 2004 Rules on National Practice (A.M. No. 02-8-13-SC). Affiant exhibited to me her PRC ID, with her photograph and signature appearing thereon, with No. 0029008 and her Community Tax Certificate No. 15791150 issued on January 5, 2025 at Victoria, Oriental Mindoro, Philippines.

Witness my hand and seal this 10th day of April, 2025.

Doc. No. 40 :
Page No. 2 :
Book No. 1 :
Series of 2025


Atty. Arizza Lynne F. Maramot
Notary Public
Until December 31, 2026 NP-25-318
PTR No. 4304361/Victoria, Or. Mindoro/01-28-25
Roll No. 95398/Jan. 24, 2025
IBP No. 518741/Jan. 25, 2025/Or. Mindoro
MCLE Compliance No. Newly Admitted

BIR FORM
2303

REVISED: APRIL 2019

REPUBLIKA NG PILIPINAS
KAGAWARAN NG PANANALAPI
KAWANIHAN NG RENTAS INTERNAS

REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

OCN: 063RC2022000002713
Date OCN Generated: July 18, 2022

UPDATED ON JUL 18 2022

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE 129-326-144-00000	NAME OF TAXPAYER MATANGUIHAN, YOLANDA DIMAANO	TIN ISSUANCE DATE October 1, 2007
REGISTERING OFFICE	X Head Office	Branch
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES		

TAX TYPES	FORM TYPES	FILING START DATE	FILING FREQUENCY	FILING DUE DATE
WITHHOLDING TAX - COMPENSATION	1604C	January 1, 2023	ANNUALLY	On or before January 31 of the year following the calendar year in which the compensation payment and other income payments were paid or accrued.
VALUE ADDED TAX	2550M	May 12, 2011	MONTHLY	Not later than the 20th day following the close of the month.
VALUE ADDED TAX	2550Q	May 12, 2011	QUARTERLY	Not later than the 25th day following the close of each taxable quarter.
REGISTRATION FEE	0605	October 1, 2007	ANNUALLY	On or before the last day of January.
INDIVIDUAL INCOME TAX	1701	September 16, 2003	ANNUALLY	On or before April 15 of each year covering income for the preceding taxable year.
INDIVIDUAL INCOME TAX	1701Q	July 31, 2007	QUARTERLY	1st Quarter-on or before MAY 15 2nd Quarter-on or before AUGUST 15 3rd Quarter-on or before November 15
WITHHOLDING TAX - EXPANDED/OTHERS	0619E	July 18, 2022	MONTHLY	On or before the 10th day of the month following the month in which withholding was made.
WITHHOLDING TAX - EXPANDED/OTHERS	1601EQ	July 18, 2022	QUARTERLY	Not later than the last day of the month following the close of the quarter during which withholding was made.
WITHHOLDING TAX - EXPANDED/OTHERS	1604E	January 1, 2023	ANNUALLY	On or before March 1 of the year following the calendar year in which the income payments subject to expanded withholding taxes or exempt from withholding tax were paid or accrued.
WITHHOLDING TAX - COMPENSATION	1601C	March 16, 2022	MONTHLY	On or before the 10th day of the month following the month when the withholding was made except for taxes withheld for December which shall be filed and paid/remitted on or before

BIR FORM

2303

REVISED: APRIL 2019

REPUBLIKA NG PILIPINAS
KAGAWARAN NG PANANALAPI
KAWANIHAN NG RENTAS INTERNAS
REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

OCN: 063RC2022000002713

Date OCN Generated: July 18, 2022

UPDATED ON JUL 18 2022**CERTIFICATE OF REGISTRATION**

TIN & BRANCH CODE 129-326-144-00000	NAME OF TAXPAYER MATANGUIHAN, YOLANDA DIMAANO	TIN ISSUANCE DATE October 1, 2007
REGISTERING OFFICE	X Head Office	Branch
REGISTERED ADDRESS POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES		

		January 15 of the succeeding year.	
TAXPAYER TYPE/S		SINGLE PROPRIETORSHIP ONLY (RESIDENT CITIZEN)	
BUSINESS INFORMATION DETAILS			
		CATEGORY	REGISTRATION DATE
TRADE NAME 1	CPA PHARMACY		October 1, 2007
(PSIC)	46594-WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT	Secondary	
Line of Business	WHOLESALE OF PROFESSIONAL AND SCIENTIFIC AND MEASURING AND CONTROLLING EQUIPMENT		
(PSIC)	47722-RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES	Primary	
Line of Business	RETAIL SALE OF MEDICAL, SURGICAL AND ORTHOPEDIC GOODS/INSTRUMENTS AND DENTAL SUPPLIES		
(PSIC)	47720-RETAIL SALE OF PHARMACEUTICAL AND MEDICAL GOODS, COSMETIC AND TOILET ARTICLES IN SPECIALIZED STORES	Secondary	
Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES		
(PSIC)	46429-WHOLESALE OF MISCELLANEOUS CONSUMER GOODS, N.E.C.	Secondary	
Line of Business	WHOLESALE OF HOUSEHOLD GOODS		
(PSIC)	47739-OTHER RETAIL SALE OF NEW GOODS IN SPECIALIZED STORES, N.E.C.	Secondary	
Line of Business	RETAIL SALE OF OTHER GOODS IN SPECIALIZED STORES		

REMINDERS:

1. An annual registration fee shall be paid upon registration and every year thereafter on or before the last day of January, using BIR Form No. 0605.
2. Filing of required tax return/s to conform with the above tax types, whether with or without business

REPUBLIKA NG PILIPINAS
KAGAWARAN NG PANANALAPI
KAWANIHAN NG RENTAS INTERNAS
REVENUE REGION NO. 09A - CABAMIRO (CAVITE-BATANGAS-MINDORO-ROMBLON)
REVENUE DISTRICT OFFICE NO. 063 - CALAPAN, ORIENTAL MINDORO

OCN: 063RC2022000002713
 Date OCN Generated: July 18, 2022

CERTIFICATE OF REGISTRATION

TIN & BRANCH CODE	NAME OF TAXPAYER	TIN ISSUANCE DATE	REGISTERING OFFICE	Head Office	Branch	REGISTERED ADDRESS
129-326-144-00000	MATANGUHAN, YOLANDA DIMAANO	October 1, 2007				POBLACION I 5205 VICTORIA ORIENTAL MINDORO PHILIPPINES

- For new business registrants, application for registration of manual Books of Accounts (B/As) shall be before the deadline for filing of the initial quarterly income tax return or annual income tax return whichever comes earlier, from the date of registration. Registration of new set of manual B/As shall be before its use.
- Immediately inform the district office in case of transfer/cessation of business and other changes in registration information by filing BIR Form No. 1905.
- For Self-Employed Individuals (SEI) whose gross sales and/or receipts and other non-operating income does not exceed P3,000,000 and who opted to avail of the 8% Income tax rate, the tax type Percentage Tax (PT) shall not be reflected in the Certificate of Registration (COR). However, at the start of each taxable year, such SEI shall be automatically subjected to graduated income tax rates and required to file quarterly percentage tax return (BIR Form No. 2551Q) and option to replace the COR to reflect "PT", unless qualified and opted to avail of the 8% Income tax rate annually.

I hereby certify that the above named person is registered as indicated above, under the provision of the National Internal Revenue Code, as amended.

EMELITA R. ABO

REVENUE DISTRICT OFFICER

(Signature over Printed Name)

MERIAN Z. ROMERO
 CHIEF CLIENT SUPPORT SECTION



THIS CERTIFICATE MUST BE EXHIBITED CONSPICUOUSLY IN THE PLACE OF BUSINESS



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REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

FILING REFERENCE NO.

TIN	: 129-326-144-000
Name	: MATANGUIHAN YOLANDA DIMAANO
RDO	: 063
Form Type	: 2550Q
Reference No.	: 102500063654092
Amount Payable (Over Remittance)	: 3,461.10
Accounting Type	: C - Calendar
For Tax Period	: 12/31/2024
Quarter	: 4
Date Filed	: 01/18/2025
Tax Type	: VT

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**efps** e-Filing and Payment SystemBureau of Internal Revenue
Republic of the Philippines

BIR eFPS has received the payment confirmation for your tax return from SBTC.

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Tax Type	VT
Return Period	12/31/2024
Transacting Bank	SBTC (027000)
Reference Number	102500063654092
Payment Transaction Number	256224257
Payment Transaction Date	01/18/2025
Actual Amount Paid	3461.10
SBTC's Confirmation Number	BI-011825-90041
Please refer to the Tax Return Inquiry facility to check the status of your payment.	

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Reference No:102500063654092
Date Filed:January 18, 2025 10:30 AM
Batch Number:2506398389

PSIC: 5138



Republika ng Pilipinas
Kagawaran ng Pananalapi
Kawanihan ng Rentas Internas

Quarterly Value-Added Tax Return

(Cumulative For 3 Months)

Bir Form No.
2550-Q
February 2007 (ENCS)

1 For the Year Ended (MM/YYYY) <input type="radio"/> Calendar <input type="radio"/> Fiscal (December 2024)	2 Quarter 1st 2nd 3rd 4th	3 Return Period (MM/DD/YYYY) From 10/01/2024 To 12/31/2024	4 Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	5 Short Period Return? <input type="radio"/> Yes <input checked="" type="radio"/> No
6 TIN 129 326 144 000	7 RDO Code 063	8 No. of sheets attached 0	9 Line of Business	WHOLESALE OF MISCELLANI
10 Taxpayer's Name (For Individual) Last Name, First Name, Middle Name/ (For Non-individual) Registered Name MATANGUIHAN, YOLANDA DIMAANO				11 Telephone Number
12 Registered Address PUBLIC MARKET OR. MINDORO				13 Zip Code 5205
14 Are you availing of tax relief under Special Law or International Tax Treaty? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, please specify				

PART II

Computation of Tax

Sales/Receipts for the Quarter (Exclusive of VAT)				Output Tax Due for the Quarter	
15 Vatable Sales/Receipt - Private (see Sch. 1)	15A	0.00	15B	0.00	
16 Sale to Government	16A	1,469,896.62	16B	176,387.59	
17 Zero Rated Sales/Receipts	17	116,950.00			
18 Exempt Sales/Receipts	18	0.00			
19 Total Sales/Receipts and Output Tax Due	19A	1,586,846.62	19B	176,387.59	
20 Less: Allowable Input Tax					
20A Input Tax Carried Over from Previous Period	20A		20A	0.00	
20B Input Tax Deferred on Capital Goods Exceeding P1Million from Previous Quarter	20B		20B	0.00	
20C Transitional Input Tax	20C		20C	0.00	
20D Presumptive Input Tax	20D		20D	0.00	
20E Others	20E		20E	0.00	
20F Total (Sum of Item 20A, 20B, 20C, 20D & 20E)	20F		20F	0.00	
21 Current Transactions					
Purchases					
21A/B Purchase of Capital Goods not exceeding P1Million (see Sch. 2)	21A	0.00	21B	0.00	
21C/D Purchase of Capital Goods exceeding P1Million (see Sch. 3)	21C	0.00	21D	0.00	
21E/F Domestic Purchases of Goods Other than Capital Goods	21E	751,096.37	21F	90,131.56	
21G/H Importation of Goods Other than Capital Goods	21G	0.00	21H	0.00	
21I/J Domestic Purchase of Services	21I	33,992.86	21J	4,079.14	
21K/L Services Rendered by Non-residents	21K	0.00	21L	0.00	
21M Purchases Not Qualified for Input Tax	21M	54,876.59			
Others					

21N/O	21N	0.00	21O	0.00
21P Total Current Purchases (Sum of Item 21A, 21C, 21E, 21G, 21I, 21K, 21M & 21N)	21P	839,965.82		
22 Total Available Input Tax (Sum of Item 20F, 21B, 21D, 21F, 21H, 21J, 21L & 21O)			22	94,210.70
23 Less: Deductions from Input Tax				
23A Input Tax on Purchases of Capital Goods exceeding P1Million deferred for the succeeding period (see Sch. 3)			23A	0.00
23B Input Tax on Sale to Gov't. closed to expense (see Sch. 4)			23B	0.00
23C Input Tax allocable to Exempt Sales (see Sch. 5)			23C	0.00
23D VAT Refund / TCC claimed			23D	0.00
23E Others			23E	0.00
23F Total (Sum of Item 23A, 23B, 23C, 23D & 23E)			23F	0.00
24 Total Allowable Input Tax (Item 22 less Item 23F)			24	94,210.70
25 Net VAT Payable (Item 19B less Item 24)			25	82,176.89
26 Less: Tax Credits/Payments				
26A Monthly VAT Payments - previous two months			26A	0.00
26B Creditable Value-Added Tax Withheld (see Sch. 6)			26B	78,715.79
26C Advance Payment for Sugar and Flour Industries (see Sch. 7)			26C	0.00
26D VAT withheld on Sales to Government (see Sch. 8)			26D	0.00
26E VAT paid in return previously filed, if this is an amended return			26E	0.00
26F Advance Payments made (please attach proof of payments - BIR Form No. 0605)			26F	0.00
26G Others			26G	0.00
26H Total Tax Credits/Payments(Sum of Item 26A, 26B, 26C, 26D, 26E, 26F, & 26G)			26H	78,715.79
27 Tax Still Payable/ (Overpayment) (Item 25 less Item 26H)			27	3,461.10
28 Add: Penalties				
Surcharge	28A	0.00	Interest	28B
			Compromise	28C
				0.00
29 Total Amount Payable (Overpayment) (Sum of Item 27 & 28D)			29	3,461.10

Attachments

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REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE

FILING REFERENCE NO.

TIN	: 129-326-144-000
Name	: MATANGUIHAN YOLANDA DIMAANO
RDO	: 063
Form Type	: 1701Q
Reference No.	: 422400062533365
Amount Payable (Over Remittance)	: 4,619.40
Accounting Type	: C - Calendar
For Tax Period	: 09/30/2024
Date Filed	: 11/07/2024
Tax Type	: IT

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BIR eFPS has received the payment confirmation for your tax return from SBTC.

TIN	129 - 326 - 144 - 000
Taxpayer's Name	MATANGUIHAN, YOLANDA DIMAANO
Tax Type	IT
Return Period	09/30/2024
Transacting Bank	SBTC (027000)
Reference Number	422400062533365
Payment Transaction Number	244987552
Payment Transaction Date	11/07/2024
Actual Amount Paid	4619.40
SBTC's Confirmation Number	BI-110724-90426

Please refer to the Tax Return Inquiry facility to check the status of your payment.

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Reference No: 422400062533365
Date Filed: November 07 2024 10:23 AM
Batch Number: 0



1701Q 01/18ENCS P1

For BIR Use Only BCS/Item

 Republika ng Pilipinas Kagawaran ng Pananalapi Kawanihan ng Rentas Internas		Quarterly Income Tax Return For Individuals, Estates and Trusts <small>Enter all required information in CAPITAL LETTERS using BLACK ink. Mark applicable boxes with an "X". Two copies MUST be filed with the BIR and one held by the Tax Filer.</small>		BIR Form No. 1701Q January 2018 (ENCS) Page 1	
1 For the Year (YYY) 2024		2 Quarter <input type="radio"/> 1st <input type="radio"/> 2nd <input checked="" type="radio"/> 3rd		3 Amended Return? <input type="radio"/> Yes <input checked="" type="radio"/> No	
				4 Number of Sheet/s Attached 0	
Part I – Background Information on Taxpayer/Filer					
5 Taxpayer Identification Number (TIN) 129 - 326 - 144 - 000				6 RDO Code 063	
7 Taxpayer/Filer Type <input checked="" type="radio"/> Single Proprietor <input type="radio"/> Professional <input type="radio"/> Estate <input type="radio"/> Trust					
8 Alphanumeric Tax Code (ATC) <input checked="" type="radio"/> II012 Business Income–Graduated IT Rates <input type="radio"/> II014 Income from Profession–Graduated IT Rates <input type="radio"/> II013 Mixed Income–Graduated IT Rates <input type="radio"/> II015 Business Income–8% IT Rate <input type="radio"/> II017 Income from Profession–8% IT Rate <input type="radio"/> II016 Mixed Income–8% IT Rate					
9 Taxpayer/Filer's Name (Last Name, First Name, Middle Name for Individual) / ESTATE of (First Name, Middle Name, Last Name) / TRUST FAO: (First Name, Middle Name, Last Name) MATANGUIHAN, YOLANDA DIMAANO					
10 Registered Address (Indicate complete registered address. If branch, indicate the branch address. If the registered address is different from the current address, go to the RDO to update registered address by using BIR Form 1905) PUBLIC MARKET OR. MINDORO					
				10A ZIP Code 5205	
11 Date of Birth (MM/DD/YYYY) 09/15/1963		12 Email Address ydmatanguihan_cpa@yahoo.com			
13 Citizenship FILIPINO		14 Foreign Tax Number (if applicable)		15 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input checked="" type="radio"/> No	
16 Tax Rate* (choose one, for income from business/profession) <input checked="" type="radio"/> Graduated Rates per Tax Table – page 2 Choose Method of Deduction in Item 16A) <input type="radio"/> 8% on gross sales/receipts & other non-operating income in lieu of Graduated Rates under Sec. 24(A)(2)(a) & Percentage Tax under Sec. 116 of the NIRC, as amended [available if gross sales/receipts and other non-operating income do not exceed Three Million Pesos (P 3M)]					
16A Method of Deduction <input checked="" type="radio"/> Itemized Deduction [Sec. 34(A–J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]					
Part II – Background Information on Spouse (if applicable)					
17 Spouse's TIN 129 - 326 - 144 - 000				18 RDO Code	
19 Filer's Spouse Type <input type="checkbox"/> Single Proprietor <input type="checkbox"/> Professional <input type="checkbox"/> Compensation Eamer					
20 ATC <input type="radio"/> II012 Business Income–Graduated IT Rates <input type="radio"/> II014 Income from Profession–Graduated IT Rates <input type="radio"/> II013 Mixed Income–Graduated IT Rates <input type="radio"/> II011 Compensation Income <input type="radio"/> II015 Business Income–8% IT Rate <input type="radio"/> II017 Income from Profession–8% IT Rate <input type="radio"/> II016 Mixed Income–8% IT Rate					
21 Spouse's Name (Last Name, First Name, Middle Name)					
22 Citizenship		23 Foreign Tax Number, if applicable		24 Claiming Foreign Tax Credits? <input type="radio"/> Yes <input checked="" type="radio"/> No	
25 Tax Rate* (choose one, for income from business/profession) <input type="radio"/> Graduated Rates per Tax Table – page 2 Choose Method of Deduction in Item 25A) <input type="radio"/> 8% on gross sales/receipts & other non-operating income in lieu of Graduated Rates under Sec. 24(A)(2)(a) & Percentage Tax under Sec. 116 of the NIRC, as amended [available if gross sales/receipts and other non-operating income do not exceed Three Million Pesos (P 3M)]					
25A Method of Deduction <input type="radio"/> Itemized Deduction [Sec. 34(A–J), NIRC] <input type="radio"/> Optional Standard Deduction (OSD) [40% of Gross Sales/Receipts/Revenues/Fees [Sec. 34(L), NIRC]]					

Part III – Total Tax Payable <small>(DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)</small>		
Particulars	A) Taxpayer/Filer	B) Spouse
26 Tax Due <small>(From Part V, Schedule I-Item 46 OR Schedule II-Item 54)</small>	49,687	0
27 Less: Tax Credits/Payments <small>(From Part V, Schedule III-Item 62)</small>	45,068	0
28 Tax Payable/(Overpayment) <small>(Item 26 Less Item 27) (From Part V, Item 63)</small>	4,619	0
29 Add: Total Penalties <small>(From Part V, Schedule IV-Item 67)</small>	0	0
30 Total Amount Payable/(Overpayment) <small>Sum of Items 28 and 29 (From Part V, Item 68)</small>	4,619	0
31 Aggregate Amount Payable/(Overpayment) <small>(Sum of Item 30A and 30B)</small>		4,619

I declare under the penalties of perjury, that this annual return has been made in good faith, verified by me, and to the best of my knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. *(If Authorized Representative, attach authorization letter and indicate TIN.)*

Signature over Printed Name of Taxpayer/Authorized Representative/Tax Agent
(Indicate Title/Designation and TIN)

Part IV – Details of Payment				
Particulars	Drawee Bank/Agency	Number	Date(MM/DD/YYYY)	Amount
32 Cash/Bank Debit Memo				
33 Check				
34 Tax Debit Memo				
35 Others <small>(specify below)</small>				
Machine Validation/Revenue Official Receipt Details <small>(if not filed with an Authorized Agent Bank)</small>			Stamp of receiving Office/AAB and Date of Receipt <small>(RO's Signature/Bank Teller's Initial)</small>	

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Reference No: 422400062533365
Date Filed: November 07 2024 10:23 AM
Batch Number: 0

BIR Form No. 1701Q January 2018 (ENCS) Page 2		Quarterly Income Tax Return For Individuals, Estates and Trusts			
TIN 129 - 326 - 144 - 000		Taxpayer/Filer's Last Name MATANGUIHAN, YOLANDA DIMAANO			
PART V – COMPUTATION OF TAX DUE (DO NOT enter Centavos; 49 Centavos or Less drop down; 50 or more round up)					
Declaration this Quarter		A) Taxpayer/Filer		B) Spouse	
If graduated rate, fill in items 36 to 46; if 8%, fill in items 47 to 54					
Schedule I – For Graduated IT Rate					
36 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)		857,830		0	
37 Less: Cost of Sales/Services (applicable only if availing Itemized Deductions)		669,492		0	
38 Gross Income/(Loss) from Operation (Item 36 Less Item 37)		188,338		0	
Less: Allowable Deductions					
39 Total Allowable Itemized Deductions		122,166		0	
OR					
40 Optional Standard Deduction (OSD) (40% of Item 36)		0		0	
41 Net Income/(Loss) This Quarter (If Itemized: Item 38 Less Item 39; If OSD: Item 38 Less Item 40)		66,172		0	
Add: 42 Taxable Income/(Loss) Previous Quarter/s		469,765		0	
43 Non-Operating Income (specify)		0		0	
<div>Add Delete Upload Attachment</div>					
44 Amount Received/Shared in Income by a Partner from General Professional Partnership (GPP)		0		0	
45 Total Taxable Income/(Loss) To Date (Sum of Items 41 to 44)		535,937		0	
46 TAX DUE (Item 45 × Applicable Tax Rate based on Tax Table below) (To Part III, Item 26)		49,687		0	
Schedule II – For 8% IT Rate					
47 Sales/Revenues/Receipts/Fees (net of sales returns, allowances and discounts)		0		0	
48 Add: Non-Operating Income (specify)		0		0	
<div>Add Delete Upload Attachment</div>					
49 Total Income for the quarter (Sum of Items 47 and 48)		0		0	
50 Add: Total Taxable Income/(Loss) Previous Quarter (Item 51 of previous quarter)		0		0	
51 Cumulative Taxable Income/(Loss) as of This Quarter (Sum of Items 49 and 50)		0		0	
52 Less: Allowable reduction from gross sales/receipts and other non-operating income of purely self-employed individuals and/or professionals in the amount of ₱ 250,000		0		0	
53 Taxable Income/(Loss) To Date (Item 51 Less Item 52)		0		0	
54 TAX DUE (Item 53 × 8% Tax Rate) (To Part III, Item 26)		0		0	
Schedule III – Tax Credits/Payments					
55 Prior Year's Excess Credits		0		0	
56 Tax Payment/s for the Previous Quarter/s		10,614		0	
57 Creditable Tax Withheld for the Previous Quarter/s		22,789		0	
58 Creditable Tax Withheld per BIR Form No. 2307 for this Quarter		11,665		0	
59 Tax Paid in Return Previously Filed, if this is an Amended Return		0		0	
60 Foreign Tax Credits, if applicable		0		0	
61 Other Tax Credits/Payments (specify)		0		0	
<div>Add Delete Upload Attachment</div>					

62 Total Tax Credits/Payments (Sum of Items 55 to 61) (To Part III, Item 27)	45,068	0
63 Tax Payable/(Overpayment) (Item 46 or 54, Less Item 62) (To Part III, Item 28)	4,619	0
Schedule IV – Penalties		
64 Surcharge	0	0
65 Interest	0	0
66 Compromise	0	0
67 Total Penalties (Sum of Items 64 to 66) (To Part III, Item 29)	0	0
68 Total Amount Payable/(Overpayment) (Sum of Items 63 and 67) (To Part III, Item 30)	4,619	0

TABLE 1 – Tax Rates (effective January 1, 2018 to December 31, 2022)		TABLE 2 – Tax Rates (effective January 1, 2023 and onwards)	
If Taxable Income is:	Tax Due is:	If Taxable Income is:	Tax Due is:
Not over ₱250,000	0%	Not over ₱250,000	0%
Over ₱250,000 but not over ₱400,000	20% of the excess over ₱250,000	Over ₱250,000 but not over ₱400,000	15% of the excess over ₱250,000
Over ₱400,000 but not over ₱800,000	₱30,000 + 25% of the excess over ₱400,000	Over ₱400,000 but not over ₱800,000	₱22,500 + 20% of the excess over ₱400,000
Over ₱800,000 but not over ₱2,000,000	₱130,000 + 30% of the excess over ₱800,000	Over ₱800,000 but not over ₱2,000,000	₱102,500 + 25% of the excess over ₱800,000
Over ₱2,000,000 but not over ₱8,000,000	₱490,000 + 32% of the excess over ₱2,000,000	Over ₱2,000,000 but not over ₱8,000,000	₱402,500 + 30% of the excess over ₱2,000,000
Over ₱8,000,000	₱2,410,000 + 35% of the excess over ₱8,000,000	Over ₱8,000,000	₱2,202,500 + 35% of the excess over ₱8,000,000

Attachments

Add Attachment

Remove Attachment



Bringing in Revenues
for Nation-building

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF FINANCE
BUREAU OF INTERNAL REVENUE
REVENUE REGION NO. 9A - CaBaMiRo

QF-TCC-01-01-2024.01

ANNEX "M"

TCBP NO. RR9A-063-03-06-R0493-2025-E

TAX CLEARANCE CERTIFICATE

(Pursuant to Executive Order No. 398)

**MATANGUIHAN, YOLANDA
DIMAANO**
(CPA PHARMACY)

Name of Taxpayer

POBLACION I, VICTORIA, ORIENTAL MINDORO
Address

129-326-144-00000

Taxpayer Identification Number

This is to certify that the above mentioned taxpayer is eligible for issuance of this Tax Clearance Certificate having satisfied all the criteria set forth by the BIR as of the date of this certification pursuant to Revenue Regulations No. 8-2016, as amended.

Tax liabilities recorded after the aforesaid dates or outside the jurisdiction of this Office are not covered by this tax clearance.

Issued this 6th day of March, 2025.

NOTE: THIS CERTIFICATE SHALL BE VALID AND EFFECTIVE FROM DATE OF ISSUE UNTIL MARCH 06, 2026 ONLY OR UNTIL REVOKED FOR VIOLATION OF THE CRITERIA SPECIFIED UNDER REVENUE REGULATIONS NO. 8-2016, AS AMENDED AND REVENUE MEMORANDUM ORDER NO. 46-2018, WHICHEVER COMES EARLIER. THIS SHALL NOT BE USED ON SALES/TRANSFER OF REAL PROPERTIES. CERTIFICATION FEE OF P100 WAS PAID ON MARCH 02, 2025 UNDER EFPS PAYMENT TRANSACTION NO. 257314062. ANY ERASURE MADE ON THIS TCC SHALL RENDER IT NULL AND VOID.




ROSALINDA D. CABIDOG
Chief, Collection Division

DOCUMENTARY STAMP TAX
DATE OF PAYMENT: 03/02/2025
PAYMENT CONFIRMATION:
257314120
AMOUNT: P30.00

WARNING: Counterfeiting is punishable by law. For authenticity, please visit BIR website <https://www.bir.gov.ph/Tax-Clearance-List-Issued-TCC>. Tax Clearance Certificate (for bidding purposes) not listed/posted herein will be deemed to have originated from an illegal source.



This certifies that

CPA PHARMACY
(NATIONAL)

is a business name registered in this office pursuant to the provisions of Act 3883, as amended by Act 4147 and Republic Act No. 863, and in compliance with the applicable rules and regulations prescribed by the Department of Trade and Industry.
This certificate issued to

YOLANDA DIMAANO MATANGUIHAN

is valid from 01 October 2020 to 01 October 2025 subject to continuing compliance with the above-mentioned laws and all applicable laws of the Philippines, unless voluntarily cancelled

In testimony whereof, I hereby sign this

Certificate of Business Name Registration

and issue the same on 01 October 2020 in the Philippines.


RAMON M. LOPEZ
Secretary

Business Name No. 2209456

This certificate is not a license to engage in any kind of business and valid only at the scope indicated herein.



APZC451711556783



Republic of the Philippines
Department of Health
Food and Drug Administration
Civic Drive, Filinvest Corporate City
Alabang, Muntinlupa City



LICENSE TO OPERATE

as

Drug Distributor-Wholesaler

is hereby granted to

CPA PHARMACY

Public Market, Poblacion 1, Victoria, Oriental Mindoro, Mimaropa
(Region IV-B), 5205, Victoria, Oriental Mindoro

Owner: **YOLANDA D. MATANGUIHAN**
License Number: **CDRR-RIVB-DW-652922**
Application Type: **Renewal**
Date of Issuance: **08 June 2023**
Validity of License: **31 August 2026**



This LTO shall be renewed within **90 days** before its expiration, upon compliance with relevant laws, rules and regulations and the payment of fees. This LTO may be suspended, cancelled or revoked by this Office for cause if found violating RA 9711 and related issuances.

Furthermore, with this LTO, the FDA allows the establishment to apply for a market authorization [i.e. registration (CPR) or notification] for health products prior to manufacture, importation, sale or offer for sale, distribution, transfer and advertisement as the case may be.

DR. SAMUEL A. ZACATE
Director General

This electronic-LTO (eLTO) is computer generated and does not require signature

Standard Form Number: SF-GOOD-01
Revised on: May 24, 2004

APPROVED BUDGET FOR THE CONTRACT (ABC)
SUPPLY AND DELIVERY OF DRUGS AND MEDICINES FOR THE UNIVERSITY CLINIC OF MINSU MAIN CAMPUS
Alcate, Victoria, Oriental Mindoro
Project Name and Location

Stations: Mindoro State University

Length:

Contract Duration:

Contract Duration:															
ITEM NO.	DESCRIPTION	QUANTITY	UNIT	CURRENT MARKET PRICE	TOTAL COST	VAT, OTHER TAXES AND/OR DUTIES APPLICABLE	FREIGHT & INSURANCE	OTHER INDIRECT COSTS	OTHER COST FACTORS					TOTAL COST	UNIT COST
									INFLATION, CURRENCY		VALUE	INFLATION, CURRENCY			
									%			%			
									(10)	(11)		(5)X(9)	(12)		
(13)															
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)			
1	Aceite De Manzanilla 60ml	24	bottles	35.00	840.00										
2	Ascorbic Acid 500 mg	1050	tablets	6.50	6,825.00										
3	Band Aid	25	boxes	85.00	2,125.00										
4	Butamirate Citrate 50mg by 100's	2	boxes	1,550.00	3,100.00										
5	Camphor, Menthol Eucalyptus Oil 10g	36	pieces	40.00	1,440.00										
6	Cefuroxime 500mg	200	tablets	44.00	8,800.00										
7	Celecoxib 400mg	200	tablets	25.00	5,000.00										
8	Clindamycin HCl 300mg	1	boxes	371.00	371.00										
9	Clobetasole Ointment 5g	10	tubes	150.00	1,500.00										
10	Cloxacillin 500mg by 100's	2	boxes	1,100.00	2,200.00										
11	Co Amoxiclav 625mg	300	boxes	27.00	8,100.00										
12	Dequalinium Chloride	5	boxes	850.00	4,250.00										
13	Dichlorobenzyl Alcohol Amylmetacresol	200	sachets	50.00	10,000.00										
14	Ascorbic Acid by 2's	2	boxes	1,500.00	3,000.00										
15	Domperidone 10mg by 100's	24	bottles	42.00	1,008.00										
16	Efficascent Oil 60ml	10	boxes	255.00	2,550.00										
17	Ferrous SO4 60mg by 100's (individually packed)	300	tablets	9.50	2,850.00										
18	Hyoscine N-Butyl Bromide 10mg	36	bottles	55.00	1,980.00										
19	Hydrogen Peroxide 120ml	6	bottles	620.00	3,720.00										
20	Hexetidine 250ml	4	boxes	380.00	1,520.00										
21	Loperamide 2mg by 100's	10	boxes	900.00	9,000.00										
22	Loratadine 10mg by 100's	3	boxes	400.00	1,200.00										
23	Mefenamic Acid 500mg tablets by 100's	6	tubes	179.50	1,077.00										
24	Mupirocin Ointment 5g	40	bottles	58.00	2,320.00										
25	Methyl Salicylate Camphor + Menthol 30ml	2	boxes	2,500.00	5,000.00										
26	Omeprazole Inhibita 40mg by 100's	48	bottles	30.00	1,440.00										
	Povidone Iodine 7.5ml														

